PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10602144

CLAIMS AS FILED - PART I (Column 1) (Column							_	MALL EN	ITITY	OR	OTHER SMALL	
TOTAL CLAIMS			10				· ſ	RATE	FEE		RATE	. FEE
FOR			NUMBER FILED			R EXTRA		BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			(0 minus 20=		• 6		,	X\$ 9= .		OR	X\$18=	
INDEPENDENT CLAIMS			/ minus 3 =		T)			X42=		OR	- X84=	·
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	·: .
* If the difference in column 1 is less than zero, enter "0" in column 2						olumn 2	L	TOTAL) 1	TOTAL	750
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL E	NTITY	ÒR	OTHER SMALL I	THAN	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY .	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total .	- 10	Minus	** 5	9	=		X\$ 9=.		OR	X\$18=	
	Independent	* NTATION OF MI	Minus	### C	3 J	= 4		X42=		ÖR	X84=	
7 .	rinor rhese	IVIATION OF MI	JETIFÆ VEF	CIADCIA	CLAHAI		, [+140=		OR	+280=	
							L	TOTAL DDIT, FEE		OR	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT.		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	٠	RATE	ADDI- TIONAL FEE
	Total	.*	Minus	##		= .		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		=		X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							.440			200	
	· ·	•.	: •			٠.	. L	+140=		OR	+280=	
							A	DDIT: FEE		OR	ADDIT. FEE	
	استنديم المستعادية	(Column 1)		(Colur		(Column 3)	_	•				·
AMENDMENTC		REMAINING AFTER AMENDMENT			BER . DUSLY	PRESENT		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	. ***		=	lt	X42=			X84=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM]	+140=		OR		
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								<u> </u>	OR	+280=	
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."							TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
		nber Previously Pa					er four	nd in the app	oropriate box	c in col	lumn 1,	· .